2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# J14878

Entity Name: SEFRAN, INC.

Current Principal Place of Business:

18999 BISCAYNE BLVD
STE 105
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

18999 BISCAYNE BLVD
STE 105
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 58-1688963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MACKEN, ALAN
18999 BISCAYNE BLVD
STE 105
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	VPD	( ) Delete
Name:	FRANCO, ROBERT	
Address:	166 E. 63RD STREET	
City-St-Zip:	NEW YORK, NY 10021	
Title:	VPD	( ) Delete
Name:	BEISPEL, RACHEL	
Address:	290 WEST END AVENUE	
City-St-Zip:	NEW YORK, NY 10023	
Title:	VPD	( ) Delete
Name:	MACKEN, LILLIAN	
Address:	18999 BISCAYNE BLVD	
City-St-Zip:	N MIAMI BEACH, FL 33180	
Title:	T	( ) Delete
Name:	BEISPEL, STEVEN	
Address:	20 WEST 86TH ST.	
City-St-Zip:	NEW YORK, NY 10024	
Title:	RAS	( ) Delete
Name:	MACKEN, ALAN	
Address:	18999 BISCAYNE BLVD	
City-St-Zip:	AVENTURA, FL 33180	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLIAN MACKEN VPD 04/29/2005

Electronic Signature of Signing Officer or Director — Date